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FEC FORM 1		STATE ORG <i>A</i>					Office U	se Only		
NAME OF COMMITTEE (in	n full)	(Check if is change		Example: If typing, over the lines.	type	12FE4M	5			
National R	etail F	ederation	Retail	PAC						
		325 7th Street NV	V Suite #110	0						
ADDRESS (number a	and street)									
(Check if address is changed)		Washington				DC	20004		-	
			S	STATE		ZIP CC	DE			
COMMITTEE'S E-MA (Check if is change	address	S (Please provide of ricel@nrf.com	only one e-m	nail address)						
COMMITTEE'S WEB (Check if is change	address	RESS (URL) None								
2. DATE 10	0 11	2011	Y							
3. FEC IDENTIFIC	CATION NU	MBER	C coo	040329						
4. IS THIS STATE	MENT	NEW (N)	OR	× AMENDE	D (A)					
I certify that I have of	examined this	Statement and to	o the best o	f my knowledge and	l belief it is	true, corre	ct and con	nplete.		
Type or Print Name	of Treasurer	David French								
Signature of Treasure	David Fr er	rench		[Electronically	Filed] Da	ate 1	0 / D	11		011
NOTE: Submission of				ay subject the person				Ities of 2	2 U.S.C.	. §437g.

l U:	ice se nly				For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2009)	
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